Founded on May 5, 1980, KARIDAT has to this day served thousands of residents. Moreover, in the early 1990s, through the leadership of Bishop Camacho, the diocese has maintained a Human Rights Advocacy Office. This office was instrumental in protecting the rights of foreign workers and upholding the church's social teachings.

However, due to founding constraints, the office was closed in the late 1990s. Over the years, Bishop Camacho has guided the faithful in facing major community issues by releasing pastoral letters on casino gambling, human trafficking, substance abuse, abortion and their impact on individual and family values. Mr. Zaldy Dandan, the editor of a local newspaper, The Marianas Variety, described Bishop Camacho as "the island's most trusted, most revered and most beloved public figure, an exemplary representative of the One, Holy, Catholic, and Apostolic Church. He is the soul of Saipan, the conscience of the island, and the pride of the Northern Marianas.

In October of 2008, the Northern Mariana Islands Council for the Humanities presented Bishop Tomas A. Camacho its Lifetime Achievement in the Humanities award for his efforts in preserving the Chamorro language. Having tendered his resignation last year at the age of 75 as required by the law of the church, Bishop Camacho is now waiting for Pope Benedict XVI's appointment of our next bishop, pastor and friend.

Forty-eight years a priest and now 24 years in the Episcopacy, Bishop Camacho, the Diocese of Chalan Kanoa, and the people of the Northern Mariana Islands will have to look back at the years and hear the Master say, "Well done, good and trustworthy servant; you have shown you are trustworthy in small things, I will trust you with greater, and join your Master's happiness," Matthew chapter 25 verse 21. Only God knows what greater things there are that are beyond what Bishop Tomas A. Camacho has attained. Only God knows.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Kansas (Mr. MORAN) is recognized for 5 minutes.

(Mr. MORAN of Kansas addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. GRAYSON) is recognized for 5 minutes.

(Mr. GRAYSON addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

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## REFORMING OUR HEALTH CARE SYSTEM

The SPEAKER pro tempore. Under a previous order of the House, the gentle-

woman from Arizona (Ms. GIFFORDS) is recognized for 5 minutes.

Ms. GIFFORDS. Mr. Speaker, I rise today to talk about the most important domestic policy issue that faces our country, and that is the reforming of our health care system, this great debate that this country is having right now.

Before coming to the United States Congress, I served as a State Legislator, both in the House and in the Senate in the State of Arizona, so I had a chance to hear from people all over, from Tombstone all the way up to Flagstaff about the challenges that they faced with health care.

Before I was a State Legislator, I was the CEO of my family's tire business. And running El Campo Tires, I had a chance to make some important decisions for my employees, and that included making sure that they had good health benefits. Unlike many of my competitors, I offered health care upon hire. But year after year I saw doubledigit increases when it came to paying for our insurance premium. Now, we weren't a very large company, but I thought it was important to provide those health care benefits. It was probably detrimental to the company, but I thought that was really critical.

We see right now in the United States, as a country, that we spend too much for health care per capita. We spend well more than any other country. Yet we have 47 million Americans right now that have no health insurance. We have probably 20 million additional Americans that are underinsured, and millions and millions every day that worry that the insurance that they have won't cover them. that it won't be enough. Nationwide, premiums have doubled in the last 9 years, which have basically increased three times faster than real wages across the United States.

I represent Arizona's Eighth Congressional District and it's unique because it's burdened in different ways than other parts of the country. This is a border district, one of 10 border districts. A large amount of the geography is rural, where it's very hard to get physicians or nurses to go out there. Many parts of the district are low income. We also have fewer doctors per capita than other parts of the country. From 2001 to 2006, the out-of-pocket expenses in my district went up by 32 percent; and in 2008, there were 950 health care related personal bankruptcies in my district. So we cannot continue to perpetuate the status quo. The time for health care reform is right now. Arizonans need reform that's going to protect us from being denied coverage based on a pre-existing health condition that they might have. Arizonans need reform that guarantees care, even if we lose our job or if we move or if our spouse loses his or her job. Arizonans need reform that fosters competition, which is critical to our free market system, across the insurance companies and delivers us, the customers, the consumers, the lowest cost and the best service available. Arizonans need reform that puts the power of health care decisions back into the hands of the patient and back into the hands of their physicians. Reform is not an option, and most Americans simply know that.

As the health care legislation is being crafted and being discussed right now, we know that it has to be done responsibly. We know we need to pay for it. We can't continue to put today's expenses on to the shoulders of our children and our grandchildren. It is also critical that Americans know that if you like your plan, you can keep your plan. You should be able to make sure that your costs go down and not go up like they're continuing to do. There are savings to be had in our current system. We all know that. So we have to focus on squeezing those costs, every drop. We can do this, and we must do this. So it's really time to make sure, not that we do it fast, but that we do it right because our economy's at stake. Our children, our grandchildren, and America's prosperity are at stake right now with this health reform issue.

So thank you, Mr. Speaker, for the time, and for my constituents back home, the importance that they know that we're going to work to make sure we get this health care legislation right.

## HEALTH CARE REFORM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Virginia (Mr. GOODLATTE) is recognized for 5 minutes.

Mr. GOODLATTE. Last week, Democratic leaders in Congress introduced "America's Affordable Health the Choices Act," which sets the tone for a Washington takeover of the health care system, one defined by Federal regulation, mandates, a myriad of new big government programs, and a significant increase in Federal spending. A recent poll, which was released at the beginning of July, indicates that Americans by a margin of 2-1 think a government takeover of health care would be a bad thing. Unfortunately, the Democratic leadership is not listening to the American people and they are pushing legislation which only offers more of what is wrong with the current system.

At least two different independent analyses of the House Democrats health care legislation estimate that more than 100 million Americans would lose their current health care coverage. In addition to losing their health insurance, Americans are going to lose control over their health care decisions. Under the Democrats' vision, Washington would have ultimate control over what is best for patients, what treatments are acceptable, and how long patients wait for needed care. Additionally, this misguided health care legislation is estimated to cost the

Federal Government as much as \$1.5 trillion. In fact, Congressional Budget Office Director Douglas Elmendorf testified before the House Ways and Means Committee that the coverage proposals in this legislation would expand Federal spending on health care to a significant degree. He went on to say that in CBO's analysis so far, they didn't see other provisions in the legislation reducing Federal health spending by a corresponding degree.

To pay for this massive new government expansion, the legislation contains \$820 billion in new job-killing tax increases imposed on certain income filers, a majority of whom are small businesses, even while the country remains in a serious recession. Struggling middle class families need jobs and small businesses cannot afford to hire more workers while paying higher taxes. It's simple. People want to focus on creating jobs, not raising taxes. For this reason, the National Retail Federation, which represents the employers of one in five American workers, the National Federation of Independent Business, which represents over 350,000 small and independent businesses, the United States Chamber of Commerce. and the National Association of Manufacturers all strongly oppose the current health care reform legislation.

Rather than creating a massive government-managed health care bureaucracy that will dictate medical decisions from Washington, we should be concentrating our efforts on making health care more affordable for all Americans and giving them the freedom to choose the health care and health insurance plans that best fit their needs. Some important first steps toward real health care reform include creating health insurance tax credits, which will increase the affordability of health care for those who do not have access to employer-based health insurance, expanding health savings accounts, creating association health plans which allow employers to band together to purchase insurance coverage at lower rates for their employees, medical malpractice reform, which would discourage the practice of defensive medicine, and encouraging the establishment of a nationwide health information technology network which can reduce medical errors, save time, money and, most importantly, save lives.

While we can all agree that our current health care system is flawed, there are many different ideas about how to fix it. Republicans have solutions that will empower patients with choices, make high quality coverage more affordable, and protect and preserve the doctor-patient relationship. The most important principles in health care reform are holding down costs and preserving consumer choices. We already spend far more per person than any other country in the world. Reform must mean using the health care dollars we now spend in a smarter. more effective way. We should be preserving and enhancing the ability of people to choose the plans that are tailored to their needs and the doctors that they trust to guide them, not putting more power in the hands of Washington bureaucrats.

## HEALTH CARE REFORM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Connecticut (Mr. COURTNEY) is recognized for 5 minutes.

Mr. COURTNEY. Mr. Speaker, I also rise tonight to discuss the issue of health care. And again, we've just heard remarks which are part of a campaign really to try and, I believe, and I say this respectfully, mislead and scare people about what it is that the committees of this Congress are taking up and deliberating on. I'm on one of those committees, the Education and Labor Committee. And what my message would be here tonight is that Americans should not be alarmed. In fact, they should feel reassured about the fact that we are finally, in a serious, coherent way, trying to address a broken system. I know it's broken. I come from the State of Connecticut. Earlier this week, on Monday, there was a hearing at the State of Connecticut Department of Insurance where Blue Cross/Blue Shield came in asking for a 32 percent rate increase for its individual health insurance policies that they sell in the State of Connecticut. That's the status quo. That's the so-called patient-driven health care system that we have right now. Thirtytwo percent increase. You can't blame that on Barack Obama. You can't blame that on a government-controlled system. That's the marketplace that exists today, and it is bankrupting individuals and families at an alarming rate. Twelve thousand Americans a day are losing their health insurance. What the bill is that we are offering and as part of this effort which the President will be talking about tonight is a way of trying to control those costs and to try and create some sort of stable system for individuals and American fami-

Let me give you an example. For a single woman, working at a convenience store, earning about \$25,000 a year, if she went out today, before the 32 percent rate increase that Blue Cross is asking for, and tried to buy an individual insurance policy in Connecticut, it would be \$381.22 a month for a premium through the Blue Cross plan. It has a \$1,500 deductible, 20 and \$30 copays for primary care and specialist physicians, respectively, and an annual prescription drug benefit of only \$500. The bill that we're working on, which was reported out by the Education and Labor Committee on Friday, for an individual who's earning \$25,000 a year, their monthly premium would be \$158, less than 50 percent of what an individual is paying today, and that's without some kind of outrageous skyrocketing premium increase which Blue Cross is asking for today under our broken system.

How do you do this? Well, the answer is very simple. And Members of Congress can answer it better than anybody because they should just look in the mirror and see the system that we have today for Members of Congress. We have the opportunity to be part of a purchasing exchange, a purchasing allowance which allows millions of Federal employees across the country to spread risk, to spread cost, and to offer a broader range of choices, private plans which Members of Congress have that opportunity to pick from. And that moderates, it stabilizes the cost of the system and allows the system to operate without these harsh pre-existing condition exclusions which if a person has a heart condition or a diabetic condition, which today in the individual market completely and totally excludes them from buying insurance at all.

Now if you ask your Member of Congress about their health insurance plan and the cost of increase which took place over the last year, you could ask a Member from Ohio, where the minority leader comes from, and what it would show is that there were increases from 2008 to 2009 of only \$10 a month for many of the plans. One of the Ohio plans which was offered to Members of Congress actually reduced its monthly payment. And this is because it's just a basic market principle, and that is what the Democratic plan is proposing for all Americans, which is that we will create a large purchasing exchange which will spread risk, which will protect individuals from pre-existing condition exclusions, and which will moderate and stabilize premium costs so that you would not face the 32 percent rate increases that insurance companies like Blue Cross are asking for back home in my State, the State of Connecticut.

We also add a public option as one of the choices that can be selected by Americans who participate in this purchasing exchange. Private plans and a public option as a way of keeping the system honest and making sure that we get every efficiency possible. But no one has to choose that public option. And no provider, no doctor, or hospital has to participate in it.

You would think, from the descriptions on the other side, that people are going to be marched at gunpoint into a government plan. The opposite is completely true. There will be open choice. There will be private plans that will be offered under that purchasing exchange and it will, again, allow people the benefits of spreading risk and spreading costs just like Members of Congress have today. Every taxpayer and every citizen of this country should ask that question of their Member when the time comes to vote: Are you prepared to stand up and vote for a plan which will give us what we give you?